New England Deaconess Hospital
Boston, Massachusetts

pulse

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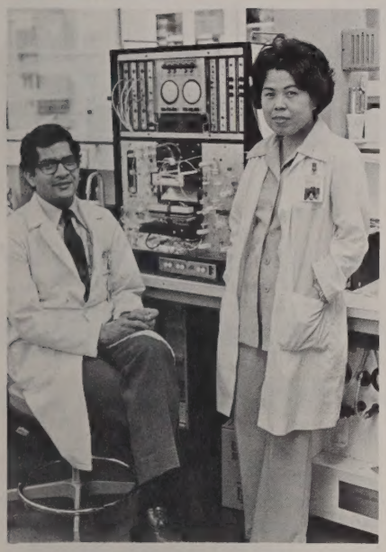

Drs. Khalid Butt (l.) and Agnes Kim

Dr. Kim named director of School of Medical Technology; Dr. Butt associate director

Dr. Agnes Kim, division of clinical pathology, department of pathology at NEDH, has been named director of the New England Deaconess Hospital-New England Baptist Hospital School of Medical Technology. Dr. Khalid Butt, division of clinical pathology at NEDH, has been appointed associate director of the School.

Dr. Kim joined the Deaconess in 1973 as a clinical pathologist, working in the hematology and the blood bank sections. She teaches in the clinical pathology residency program and in the Blood Bank Training Center.

A graduate of the Yonsei University College of Medicine, South Korea, Dr. Kim did her pathology residency at Jersey City Hospital and St. Barnabas Medical Center, New Jersey. She was an assistant pathologist at St. Barnabas and a clinical pathologist at the Veterans Administration Hospital in West Roxbury, Massachusetts before coming to the Deaconess.

Dr. Khalid Butt received his M.D. from Dacca Medical College, Pakistan. He did his pathology residency at St. Luke's Hospital, Wisconsin, and Tufts-New England Medical Center, Boston.

Dr. Butt was a pathology resident for two years at the Deaconess before being appointed to the clinical pathology staff in 1974. With special interest in microbiology, Dr. Butt is also a clinical pathologist at the New England Baptist Hospital.

The New England Deaconess Hospital-New England Baptist Hospital School of Medical Technology is affiliated with Northeastern University. Students attend the College of Pharmacy and Allied Health Professions at Northeastern University where they must complete prerequisite science and professional courses before beginning their clinical rotations at either the Deaconess or the Baptist during their junior and senior years. Of the three-quarters of clinical laboratory training, one is allotted to chemistry, one to microbiology, and one to hematology and immunohematology. Students receive lectures from medical technologists and pathologists as well as participate in actual procedures at one of the two hospitals.

Upon completion of their clinical training at the Deaconess or the Baptist, the students are eligible to take a certifying examination given by the Board of Registry (ASCP) and receive a baccalaureate degree from Northeastern University.

With the June graduation of 19 students, the NEDH-NEBH School of Medical Technology will have graduated 150 medical technologists in its 15 years of existence.

Miss Martin retires; Ms. Yard promoted in medical records

When Rose Martin retired on April 30 after 20 years as the assistant director of medical records, members of the department and her many friends throughout the hospital gathered in Harris Hall to wish her the best of luck. Upon Miss Martin's retirement, Judy Yard, supervisor of the utilization and audit units of the medical record department, has assumed the position of assistant director in the department.

For 20 years Miss Martin assisted the manager of the department and was the liaison between the medical staff and the medical records department. Prior to joining the Deaconess, she was the assistant director of medical records for many years at the Massachusetts General Hospital. Miss Martin was a lecturer in the MGH Medical Records Science School, which was then affiliated with Simmons College.

A member of both the American and the Massachusetts Medical Record Associations, Miss Martin served as vice president and as a member of several committees in the state organization.

As the new assistant director of medical records, Judy Yard's responsibilities are similar to those in the position she has held for two years as supervisor of the utilization and audit units: administration of the coding of all discharged patients' records for diagnostic, operative, and physicians indexes; organization of data abstraction for nursing audit and medical audit; and overseeing utilization review. In addition to these duties, she is responsible for the tumor registry and for overall administrative assistance to Miss Marhul.

Ms. Yard is a member of the American Medical Record Association and the Massachusetts Medical Record Association and is the area representative to the executive committee of the Massachusetts Utilization Review Association.

(Continued on page 2)

Judy Yard (l.) and Rose Martin

Dr. Buergi discusses endocrinology of thyroid at medical house officer lecture

Dr. Ulrich Buergi, second year medical resident, discussed the conversion of T-4 to T-3, two hormones produced by the thyroid, at the luncheon conference for medical house officers on April 30. His talk concluded the 1975-76 series, which was sponsored by the NEDH medical house officer alumni association.

The thyroid produces two hormones, T-4 and T-3. The effects of T-4 come slowly but are longlasting. T-3 acts in the reverse, responding quickly with its effects lasting only a short time. Thyroid hormones increase the rate of metabolism in the body.

"The source of circulating T-3 was studied quite extensively over the years. There is no doubt that at least a portion of it comes from direct secretion by the thyroid gland, but part of it is generated by peripheral conversion of T-4 to T-3, that is transformation of T-4 to T-3 outside the thyroid. This is where our research project comes in," said Dr. Buergi. Dr. Buergi was involved in this project prior to his residency at the Deaconess when he was a research associate at Boston University.

T-4 was described in 1915. After T-3 was identified in 1952, experiments proved that T-3, like T-4, was also secreted by the thyroid. But in 1970 it was discovered that in patients who had undergone a thyroidectomy or who had no functioning thyroid, when given replacement therapy with T-4, had appreciable amounts of T-3 in their serum. It was theorized T-3 had to have been derived from T-4. Dr. Buergi's research group investigated the conversion reaction using rat kidney homogenate.

"Our goal was to find out whether this reaction was possible without intact cells, that is, in a homogenate, whether it was a nonspecific reaction or a reaction mediated by an enzyme, and if this should be the case, so describe the enzyme and find out where in the cell it was located," said Dr. Buergi.

When the rat kidney homogenate was incubated with T-4, Dr. Buergi said that the longer the incubation period, the more T-4 was metabolised

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Vitrectomies restore sight for diabetics with advanced eye complications

The vitreous is a transparent, jelly-like material that fills the posterior portion of the eye. Normally the vitreous is clear. In diabetic patients it is a common complication for the vitreous to fill with blood and scar tissue as a result of hemorrhaging. When this happens, the patient gradually loses sight and may eventually become blind.

Sometimes the blood and damaged tissue will clear by itself, but in many cases a surgical procedure, called a vitrectomy, must be performed to remove the debris and restore sight.

At the Deaconess, vitrectomies are being performed by Drs. Lloyd M. Aiello and John G. Sebestyen, ophthalmologists, NEDH and Joslin Clinic. The operations are performed mostly on diabetics, who are more prone to suffer from eye complications than non-diabetics due to the nature of their disease.

"This hospital has the medical backup to provide the best care and quality of life for the diabetic patient who needs a vitrectomy," said Dr. Aiello. He explained that by the time a diabetic patient needs eye surgery, he or she is usually suffering from several complications of diabetes.

"While a patient is being considered for a vitrectomy, he or she may be a candidate for several other treatments — coronary artery bypass surgery for coronary artery disease, peripheral vascular bypass surgery for problems in circulation, and dialysis or renal transplant for kidney failure," said one of the physicians on the Deaconess Transplant Committee.

Because the New England Deaconess Hospital is a diabetic treatment center, the hospital not only can care for the eyes, but can also treat these other diabetes related complications at the same time. There is medical, surgical, and anesthesia support which enlarges the scope of care for the patient.

A patient becomes a candidate for a vitrectomy if the hemorrhage does not clear after one year or more. At this point, the patient may see only light or hand movements.

Before surgery is undertaken, two diagnostic procedures are performed to determine the extent of damage to the vitreous and the chances for restored sight. Ultrasound looks at the anatomical composition of the eye and pinpoints the location of hemorrhage damage, while the electroretinogram (ERG) is physiological and determines whether the eye will be functional after surgery. Dr. Richard M. Calderon, optometrist at the William P. Beetham Eye Unit, carries out these procedures.

"What kind of hemorrhage, old or new? Is scar tissue coming from the retina? Is the retina in its proper position or is it detached? (If the retina is partially detached, it may be repaired during the vitrectomy.) Ultrasound can answer all these questions," said Dr. Calderon.

Sound waves are sent into the eye at certain frequencies which outline the eye and its contents making the scar tissue visible. As the patient lies on a table with a plastic bag full of water over the eye, a sonar probe is put into the water. Sound waves pass through the water, which is similar in density to the eye. Because scar tissue is more acoustically dense than the vitreous, signals are picked up and appear on a sonar screen. When Dr. Calderon sees the ultrasound picture of retina detachment or scar tissue which should be noted, he takes a Polaroid photograph. The patient's eye remains under water for only 20 minutes.

The ERG detects chemical changes in the retina as it reacts to light. When it perceives light, the retina chemically changes it to electrical impulses which go to the brain. A contact lens with sensor wires is placed on the cornea of the eye to measure differences in electrical impulses and records them like an ECG. This procedure determines how well the retina and the optic nerve function.

If the results of ultrasound and ERG determine that chances for restored vision are favorable and if the patient is well enough physically and emotionally to tolerate the four-hour operation, then the vitrectomy is performed.

After general anesthesia, the patient's eye is prepared for surgery. The eye's muscles are tied in place and its blood vessels are sealed. An operating microscope called an OPMI-6 with zoom lenses and three viewing ports for binocular viewing magnify the tiny area in which Drs. Aiello and Sebestyen must operate.

The vitreotome, an instrument that looks like a pencil, enters the vetreous through a small incision in the eye. At its tip is a small light to illuminate the vitreous and a cutter, which cuts the hemorrhaged area in a rotary motion. This is controlled by a foot pedal. Connected to the vitreotome is a suction device which removes the blood and scar tissue. As the cutting and suction proceed, the eye is constantly irrigated with a saline solution which helps to wash away the hemorrhaged area. As Dr. Sebestyen cuts the scar tissue away, Dr. Aiello provides suction and irrigation.

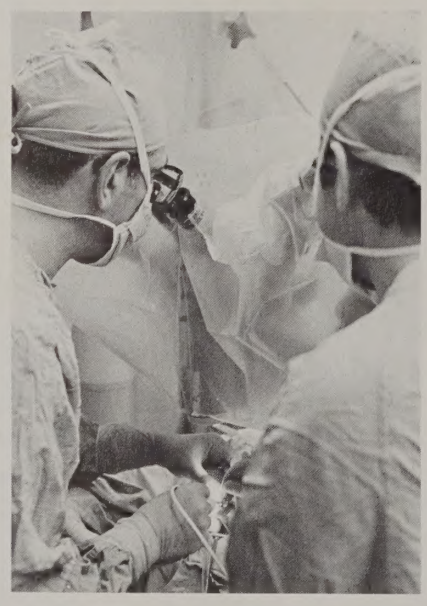
Gradually they cut through the vitreous to the back of the eye. When they can see the retina through the microscope, they know that the vitreous is free of hemorrhage and scar tissue and is clear again. They can end the operation.

The patient is discharged from the Deaconess after three to five days. There is a long post-operative recovery period in which the patient is encouraged to rest and is asked not to bend over or lift anything to prevent pressure from causing the eye to hemorrhage. Vision does not return overnight but returns gradually over a period of weeks.

A vitrectomy offers a nearly blind person a chance to see again. Although his or her restored vision may not be 20/20, it is significantly improved. The ability to see light, shapes, and colors again provides independence the blind man or woman may not have had in years.

With sight restored the quality of life for the diabetic patient is vastly improved One of the complications of diabetes has been challenged and confronted.

The ultrasound photograph shows the layers of the eye and scar tissue. In this case, scar tissue is coming off the optic nerve.



Drs. Lloyd M. Aiello (l.) and John G. Sebestyen

Medical records . . .

(Continued from page 1)

She received her B.A. in community work from Simmons College and was a social worker for the Massachusetts Welfare Department. Ms. Yard received her postgraduate certificate in medical record administration from Northeastern University and is now a registered record administrator.

Sadie Hayden, registrar in the tumor registry, in her promotion to supervisor in the medical records department is also assuming some of Miss Martin's duties. Her new responsibilities include management of the file area, which involves supervision of all record retrieval and accessibility systems, and the updating of the hospital's master patient index file.

Mrs. Hayden was a night supervisor of medical records in the outpatient department of Boston City Hospital for 13 years before joining the Deaconess two years ago. She is the chairperson of the liaison committee of the Tumor Registrars Association of New England and is a member of the liaison committee of the National Tumor Registrars Association.

"The Only Show in Town: Facts and Fashions by and for Mastectomees" was the first program of its kind in New England to feature a fashion show and exhibit for mastectomees.

"The Only Show in Town" features fashions and exhibits by and for mastectomees

"Facts and Fashions by and for Mastectomees" was more than just another fashion show. The first of its kind in New England, the fashion show featured ready-to-wear clothing modeled by mastectomees. The New England Deaconess Hospital participated in the exhibit section of the program, in which services available to breast cancer patients in Boston were shown. There were also displays of prostheses, bathing suits, and special items for the mastectomy patient.

Sponsored by the Reach to Recovery volunteers of the Massachusetts Division of the American Cancer Society, in cooperation with Jordan Marsh, the fashion show was held on March 24 at John Hancock Hall, Boston.

Fashion is for every woman. A woman who has had breast surgery need not feel that she must leave the mainstream of fashion. As the show illustrated, she can wear contemporary clothing as easily as any woman.

"There is no fashion dictate," said Charlotte Brewer, Jordan Marsh's corporate fashion director, as she introduced the show. "We all dress for our particular lifestyle."

A lifestyle doesn't have to change due to breast surgery. Models proved that point by showing off clothes for any type of figure and activity, clothes that go to the office, a party, the tennis court, and even the pool. For the mastectomee, a bathing suit can be a fashion problem, but wide shoulder straps and cap sleeves, high necklines and low backs, take care of that and also add style. The audience, almost all of whom were mastectomees, loved it.

The fashion show was preceded by a panel discussion with Mistress of Ceremonies Sonya Hamlin, television performer, producer, and director; Terese Lasser, founder, national consultant and coordinator of Reach to Recovery; Marvella Bayh, wife of U.S. Senator Birch Bayh, who had surgery four years ago; and Dr. Sheldon C. Binder, assistant professor of surgery, Tufts University School of Medicine.

Ms. Lasser founded Reach to Recovery 23 years ago because she felt so alone after her own breast cancer surgery. Now the organization has 100,000 volunteers, all former mastectomees who help other women adjust to their surgery.

Mrs. Bayh saw her mastectomy publicized on national television, as did Betty Ford and Happy Rockfeller. Mrs. Bayh commended her husband for the support he gave her after her surgery. "Only when a marriage is in trouble does it (breast surgery) make a difference. I have found that it makes a marriage stronger."

"After surgery it is important to get a women active again," said Dr. Binder, whose specialty is cancer surgery. "Reach to Recovery helps the woman get the psychological trauma of breast surgery."

The New England Deaconess Hospital Ambulatory Rehabilitation Center (ARC) also offers a program to help breast cancer patients feel involved in life and activity. Staff members Anne McCormack, R.N., and Sue Coughlin, secretary, who explained ARC's rehabilitation program in the exhibit section, were assisted by Nancy Campbell, a former patient in the mastectomy program.

To the breast cancer patient, whether she has been treated by surgery, x-ray therapy, or chemotherapy, the rehabilitation program offers education in hand and arm care, exercise, nutrition, and breast self-examination for the patients and their female family members. The ARC's rehabilitation team discusses work and activity resumption, prostheses and insurance coverage for the breast form, as well as the basic facts about treatment modalities and family risk. The women in the group share adjustment experiences with one another under the leadership of the professional team.

Sessions start at the beginning of each month and run for four consecutive Mondays. Third party coverage is available through most insurance companies. The program is open to any women in the greater Boston area, regardless of her hospital affiliation.

Consultant's proposal distributed at Long-Range Planning Committee

Members of the Long-Range Planning Committee, at their meeting on April 21, heard a preliminary report of space and facilities planning from Leon Pullen of Herman Smith Associates, national consulting firm employed by the Hospital to conduct the long-range study.

With the availability of space in the Palmer building recently vacated by the laboratories and the pending question of how best to utilize Harris Hall after the opening of the new School of Nursing, the hospital's trustees retained the Herman Smith people last January to study our needs in terms of programs and physical facilities and to make recommendations for future development and expansion. This was their first report.

A number of comments and questions were directed to Mr. Pullen following his presentation. Copies of the preliminary recommendations were distributed to committee members for careful reading so that the next two or three meetings can be devoted to discussion and modification of the suggestions outlined. In the first stage of the development program, particular priority has been placed on updating the inpatient care facilities and major ancillary department to fill immediate needs for expanding medical programs, support services and for administrative requirements.

Bequests to Deaconess increase

Joseph E. Lovejoy, chairman of the Bequest & Deferred Giving Committee, reports that as a result of his committee's efforts, 11 people have made plans to include the New England Deaconess Hospital in their wills. In addition, another nine people have requested further information on deferred gifts.

The program is one of the most important recent undertakings of the hospital's development work and if seccessful, will strengthen the institution for future years. The need for increasing the Deaconess endowment, which has been in the minds of the trustees for some time, can best be summarized by stating that our hospital has the smallest endowment of any major hospital in Boston.

In the present regulatory environment, it has become increasingly evident that to remain strong there will be a need for additional operating funds from the unrestricted endowment source.

Employees in action . . .

Diane Aronson, social service, was named "Secretary of the Day" on April 29 by radio station WHDH. Nominated by her co-workers in social service, she was interviewed on the air by Announcer Jess Cain. Ms. Aronson received a bouquet of flowers, a box of candy, two tickets to the movies, and dinner for two at a restaurant, all compliments of WHDH, which sponsors the daily event.

Peter Campisano, assistant director, acted as convener and discussant on the issues of community health care delivery during a conference called "Perspectives on a Practical Social Science" at Boston University in March.

Lucy Dean, medical technologist, gave an illustrated lecture on "New Concepts in Medical Laboratories" at the annual open meeting of the Hanover Visiting Nurse Association on April 13 in Hanover, Massachusetts.

Maryann Kurkjian, recreation director, and **Patricia Geiger,** evening recreation, Diabetes Treatment Unit, participated in a two-day workshop of the Massachusetts Association for Health, Physical Education, and Recreation, in Boston on March 18-19.

Director Richard E. Lee was named chairman-elect of the Massachusetts Hospital Association at its annual meeting at Wentworth-by-the-Sea, New Hampshire, on May 27. A member of the MHA since 1959, Mr. Lee has served as treasurer and is a member of the executive committee of the board of trustees and the task force on cost control. He has been chairman of the council on contracting agencies, co-chairman of the Blue Cross negotiating committee, and a member of the council on health care financing.

Chaplain Frederick W. Schuster has recently been certified as a chaplain and admitted as a fellow of the College of Chaplains of the American Protestant Hospital Association. He was also fully certified as a pastoral supervisor by the National Certification Committee of the Association for Clinical Pastoral Education.

Hubert D. Sycamore, assistant director, sang in Washington, D.C. as a member of the Millis Bicentennial Chorus, which performed in the capitol on April 23-24 at the Lincoln Memorial Reflecting Pool and the steps of the House of Representatives building.

380 employees honored at service award dinner

The Capers sang. Rudy Delcore's Orchestra played. And Deaconess employees danced. It was the 21st annual service awards dinner and 380 employees had a party at the Sheraton-Boston on April 21 to celebrate the 8200 years they represented. Employees who had been at the Deaconess five years or more, retirees, and members of administration gathered for dinner and dancing. Employees with 25 years or more of service received awards of merit from the General Board of Health and Welfare Ministries of the United Methodist Church. They are pictured on pages 4-5.

After a welcome from Director Richard E. Lee and Chairman of the Board C. Vincent Vappi, President Laurens MacLure discussed the Deaconess and its direction. "Government regulations and controls are growing and placing pressures on the operation of the hospital and its services," he said. "With shared and cooperative services among hospitals, we have the skill, resources, and personnel to be a leader in developing the health care system of the future. The Deaconess is doing exotic surgery and is a leader in cancer treatment, diabetes care, and cardiac surgery."

The Capers, too, said welcome, although theirs was a musical hello. *If I Ruled the World, Those were the Days,* and *If I were a Rich Man* were just a few of the numbers they sang.

The Capers closed the show with *Applause, Applause.* And Deaconess employees applauded for the whole evening, as well as for the entertainers.

Enjoying dinner are: (l. - r.) Nancy V. Dolan, R.N., cardiovascular clinical nursing specialist; Gwendolyn Muldoon, R.N., staff education instructor; and Ann Hurley, R.N., nursing care coordinator. Other guests appear in the background.

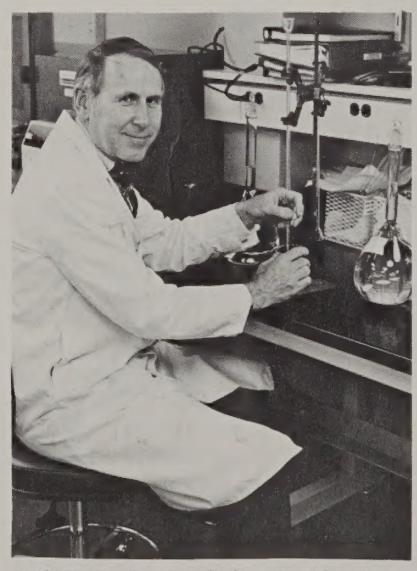
Taking her music directly to the audience, one of the Capers sings "Welcome."

LEFT. *All aboard for the service award dinner: (l. - r.) Mary deBettencourt, assistant director of social service; Gerald Cubelli, director of social service; Maisie Brangman, R.N., supervisor of ambulatory services; Margaret McLean, R.N., health coordinator; Virginia O. Diggdon, R.N., infirmarian; and Potula Marines, retiree from nursing service.*

Exchanging news of the day are: (l. - r.) Mary Mitsiu, blood bank supervisor; Fontaine Velis, and Judy Smith, hematology.

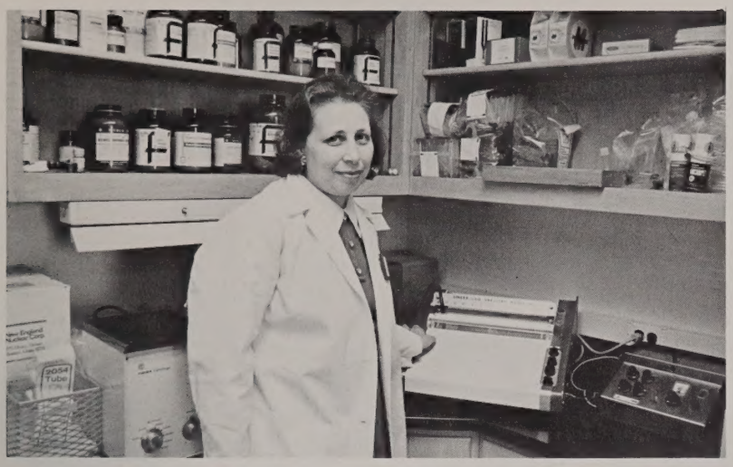
The Capers, a group who sings with pizzazz, entertain Deaconess employees at the 21st annual service award dinner at the Sheraton-Boston.

ABOVE. *Smile," says Sarah Kelley (with camera) as Maxema Reid (l.) and M. Denise Fenelon, dietetics, look on.* **RIGHT.** *And Delores Duncan, Ethel Stubbs, and A. Marie Billings (l. - r.), nursing service, respond with smiles.*

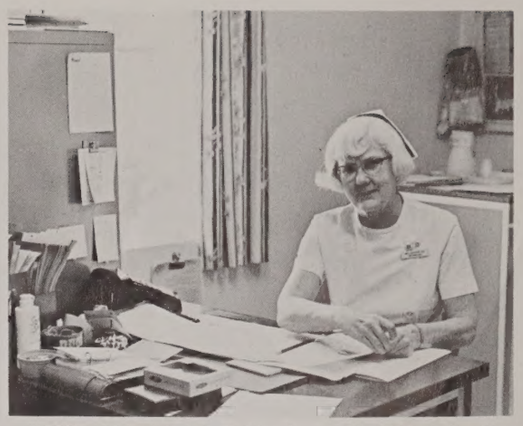


ABOVE. *Dr. Bradley E. Copeland has been a pathologist at the Deaconess for 25 years. Now the chief of the division of clinical pathology, department of pathology, at the Deaconess and the New England Baptist Hospital, Dr. Copeland was the chairman of the department of pathology of the two hospitals during 1972-75. Formerly the director of the NEDH-NEBH-Northeastern University School of Medical Technology, Dr. Copeland is chairman of the Commission on World Standards of the World Association of Societies of Pathology and a past president of the Massachusetts Society of Pathologists. He is also a councilor of the Suffolk District Medical Society. He is an associate professor of pathology at Harvard Medical School and adjunct professor of biology at Northeastern University.*

BELOW. *Madelyn E. Lendall, a graduate of Forsyth Dental School, has been with the Deaconess for 35 years. At the dental clinic she does dental prophylaxis, x-rays, and assists the oral surgeons with patients and employees.*



LEFT. *Phillippa Baudanza does platelet and leukocyte antibodies tests on patients and laboratory studies on platelets. She is a research assistant for the Cancer Research Institute Center for Blood Research, a position she has held since her graduation from the Boston Dispensary 25 years ago. Miss Baudanza has been involved with the development of the hemanetics blood processing machine as a member of Dr. James L. Tullis' staff. For relaxation Miss Baudanza makes wire and string sculptures and does photography and gardening.*

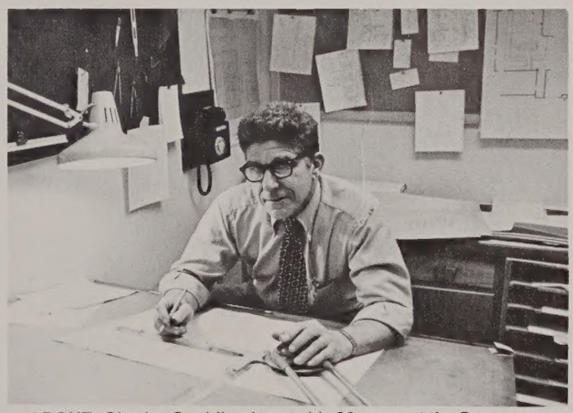


ABOVE. *When Virginia O. Diggdon graduated from the New England Deaconess Hospital School of Nursing 36 years ago, she left Harris Hall, crossed the street, and began her nursing career at the Deaconess. Since 1959 Miss Diggdon has been the infirmarian in the health center responsible for treating students from the School. She provides general care and assists with physicals and immunizations. She had previously been the head nurse on what was the neurosurgical floor, D3-N, for 14 years. During World War II Miss Diggdon served in Europe, the South Pacific, and the Artic as a nurse in the U.S. Army Nurse Corps. When she is not doing nursing, Miss Diggdon can be found riding her bicycle from Cambridge to and from work, camping, or enjoying music, birdwatching, and swimming.*

RIGHT. *For 21 of the 30 years Muriel L. Bayne, R.N., has been at the Deaconess, she has been a nurse in the electrotherapy department on Deaconess 4. Prior to that she was the assistant night supervisor for eight years in the Palmer and Deaconess buildings and has been a head nurse in the Palmer building. Mrs. Bayne is a graduate of the NEDH School of Nursing. She divides her time between nursing and caring for her home in Auburndale. She and her husband David have a large lawn aching for a garden. The results of Mrs. Bayne's green thumb are also expressed in her Deaconess 4 office.*

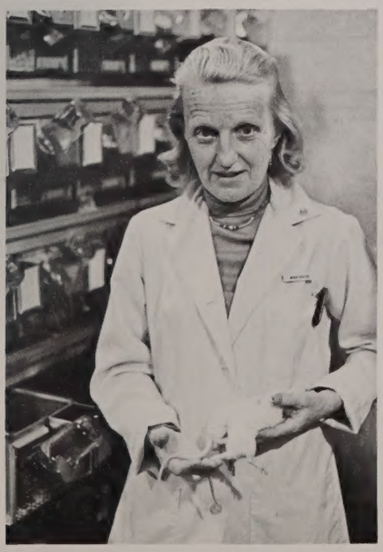
RIGHT. *Rita M. Brennan has spent 25 years at the Deaconess, all in the dietetics department. She has done a little bit of everything — working in the cafeteria and dish room, and serving on patient floors. Now she makes the salads for patients and employees, After working with food all day, Miss Brennan frequently likes to relax by going to the movies.*

ABOVE. *Samuel Marotta has been giving trims and shaves as the Deaconess barber for 30 years. "I learned how to cut hair from my uncle who had a barber shop. I apprenticed for one year before I went out on my own." He was the barber in his own shop for 14 years before joining the Deaconess. A violinist who plays for the Reading and Brookline Symphony Orchestras, Mr. Marotta also has his own dance combo and plays at a variety of functions, including weddings.*

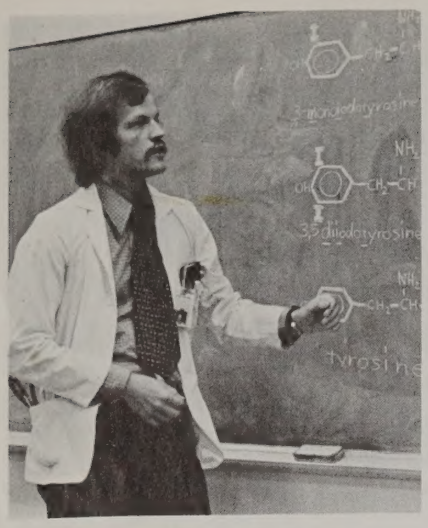


ABOVE. *Charles Spalding began his 30 years at the Deaconess as the radiation physicist in the Cancer Research Institute. He was responsible for monitoring radiation and taking care of biomedical problems. As the assistant director of maintenance and engineering, a position he has held since 1969, Mr. Spalding oversees much of the work the department does. He seems to take his work home with him, as his spare time is spent building houses, working in the machine shop in his cellar, or using his ham radio. Mr. Spalding is a graduate of Wentworth Institute and attended Northeastern University.*

ABOVE. *For 25 years Dennis W. Collins has been a cook in the dietetics department. He prepares the entire breakfast menu, bacon, eggs, toast and coffee included, for patients and employees. After breakfast, he works on lunch. A member of the Goodwill Associates of the Charles Hayden Goodwill Inn School for Boys, he was awarded a plaque for outstanding achievements for his contribution to the school. He continues to be involved in community affairs. A collector of antiques, Mr. Collins also dabbles in oil painting and travels to Europe as often as he can.*



LEFT. *Rosanna N. Chute is a research associate in experimental pathology at the Cancer Research Insititute. For 25 years she has worked under Dr. Shields Warren, carrying out surgical procedures and necropsy on experimental animals. Prior to that she worked in genetic and cancer research at the Roscoe B. Jackson Memorial Laboratories, Maine. A graduate of the University of Maine, Miss Chute received her M.A. in endocrinology from Syracuse University, New York. Miss Chute often returns to Maine, planting and painting at the house she had built.*



Dr. Ulrich Buergi

Dr. Buergi . . .

(Continued from page 1)

into T-3. Fifty percent of the T-4 reappeared as T-3. The amount of T-3 formed was proportional to the amount of homogenate, proving that something in the kidney cell homogenate was active in performing the conversion of T-4 to T-3. The next step was to determine the nature of the conversion reaction.

Dr. Buergi and his research group tested the converting system under oxidative and peroxidative conditions and found that the T-3 producing process of T-4 dejodination was reductive in nature and not oxidative.

The research group proceeded further in their project and investigated whether or not the conversion was an enzymatic reaction, a reaction mediated by a protein acting as an enzyme, or nonenzymatic. They proved that the conversion of T-4 to T-3 fulfilled the characteristics of an enzymatic reaction, although they have not been able to locate the enzyme in the cell.

"The gains from this project," said Dr. Buergi, "would be further insight in the metabolism of thyroid hormones with eventual consequences for the therapy of hyper- or hypothyroid states."

Friends discuss activities at spring meeting

"The Friends play a unique role that cannot be filled by anyone else," said Director Richard E. Lee at the spring meeting of the Friends on May 18. Over 60 Friends, the largest turnout in many years, attended the luncheon held at the Brae Burn Country Club in Newton.

Members of the auxiliary provide many services to the hospital and maintain the Gift Shop, Thrift Shop, and the diversional therapy department. Hostesses of the Christmas Open House, the Friends are also involved in the Christmas Bazaar and Deaconess Night at the Pops.

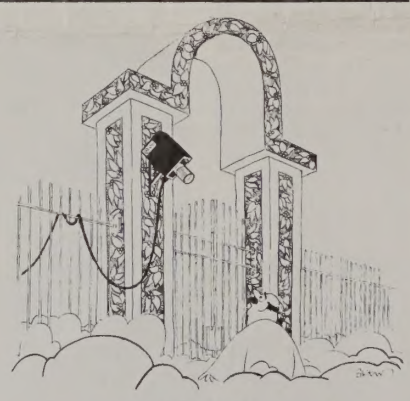
At the meeting Mrs. George Dempsey, president, discussed the importance of volunteers and the expansion of their roles in the hospital. She said that the Friends' bylaws are being updated and coordinated with the hospital's bylaws.

Members of the hospital's administration attended and extended greetings. Director of Nursing Ellen D. Howland told of the progress of the new School of Nursing. A number of committeewomen gave their reports, including the Mrs. Roger A. Perry, Jr., C. Cabell Bailey, Sheldon E. Wardwell, and Martin E. Cernek.

The Deaconess Night at the Pops is always an evening of good company and fine entertainment, and this year was no exception. Held at Symphony Hall on May 5 with Conductor Arthur Fiedler, the Pops played selections ranging from the classical to the contemporary. Soloist Catherine Stornetta captured the audience's attention with her vigorous piano playing. Mrs. David Palmer, chairwoman of the Deaconess Night at the Pops, reported that 475 tickets were sold for the annual event which raises money for the School of Nursing Scholarship Fund.

In April Mrs. Lauriston Ward, Jr., past-president of the Friends of the Deaconess and chairman of the Gift Shop, hosted a brunch to benefit the Thrift Shop. All members of the Friends were invited and asked to bring clothes, bric-a-brac, and games to donate to the Thrift Shop. Mrs. George Rohrbough, co-chairman of the Thrift Shop, reported that the 92 people who came donated enough articles to fill two station wagons and netted the Thrift Shop over $2,000.

President Laurens MacLure, guest speaker at the spring meeting updated the members on health care issues. He explained that the rise in hospital costs was due to "an explosion in technology, an explosion in technique, and an explosion in demand." He predicted that as care becomes more advanced in the future, the Deaconess will be relied upon even more to provide its specialized type of care. But technology will not be able to replace the compassion and service always offered by the Friends.



Courtesy of Medical Economics

Mrs. Haley retires after 40 years at CRI

In 1934, after spending a summer at the Marine Biological Institute, Woods Hole, Mass. and receiving her A.B. in zoology from Wheaton College, Norton, Mass., Kathryn Haley came to the Deaconess as a volunteer in anatomical pathology. She learned to do tissue sectioning before being hired a year later as a fulltime employee in the department. Mrs. Haley expanded her duties over the next few years to include photography, electrocardiography, and animal research work with Drs. Olive Gates and Shields Warren, pathologists. When the department moved into the Cancer Research Institute in 1951, Mrs. Haley worked entirely in photography, doing drawings, graphs, graphics, lettering, and slides for CRI, the department of pathology, and physicians in the hospital. She also proofread bibliographies and statistics for manuscripts. Lately she has helped in the tumor registry.

Mrs. Haley plans to narrow her activities with retirement. Once avid hunting and fishing enthusiasts in Maine, she and her husband Alfred now plan to relax at their home on Cape Cod.

"For years your trademark has been the drawing board. Take this along to recall the charts and graphs you so capably drew to keep Dr. Warren flying around the world," said Charles Spalding, an old friend of Kathryn Haley's, as he gave her a replica he had made of the drawing board. Mr. Spalding noted that the paper on the drawing board was clean and could be used during her retirement. Mrs. Haley was honored by friends and associates at a retirement party held April 29 in the Cancer Research Institute.

New England Deaconess Hospital
185 Pilgrim Road
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pulse

The New England Deaconess Hospital is a 471-bed and 16-building complex. Physicians from the Joslin Clinic, the Lahey Clinic, Overholt Thoracic Clinic and the independent medical and surgical staffs serve the needs of their patients at the hospital. The Deaconess is internationally known for diagnosis, treatment and research in brain and chest surgery, cancer, diabetes and general medicine, and is affiliated with Harvard Medical School.

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